

### Application of Docket Number

10/608978

APPLICATION AS FILED - PART I

(Column 2)

FOR	(Column 1)	(Column 2)
BASIC FEE		
37 CFR 1.16(a), (b), or (c)		
ARCH FEE		
37 CFR 1.16(k), (l), or (m)		
MINIATION FEE		
37 CFR 1.16(o), (p), or (q)		
AL CLAIMS		
37 CFR 1.16(j)	minus 20 "	
DEPENDENT CLAIMS		
37 CFR 1.16(h)	minus 8 "	
LOCATION SIZE	If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(e).	
37 CFR 1.16(e)		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(i))		

IPLE DEPENDENT OLAIM PRESENT (37 CFR 1.160))

difference in column 1 is less than zero; enter "0" in column 2.

APPLICATION AS AMENDED - PART II

(Column 1)		(Column 2)		(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total OFR 1.16(a)	13	Minus	20	= 7
Spending OFR 1.16(b)	1	Minus	3	= 2
Allocation Size Fee (37 OFR 1.16(e))				
BT PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 OFR 1.16(f))				

**AT PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160)**

(Column 1)		(Column 2)	(Column 3)
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
total 14.16(1)		Minus	"
incident 14.16(4)		Minus	"
ation Size Fee (37 CFR 1.16(s))			
PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(1)).			

PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160)

SMALL ENTITY	
RATE (\$)	FEE (\$)
X	e
X	e
TOTAL	

OR

OTHER THAN  
SMALL ENTITY

RATE (\$)	FEE (\$)
X	
X	
TOTAL	

SMALL ENTITY	
RATE (\$)	ADDITIONAL FEE (\$)
x 25 =	3
x 100 =	
180	
TOTAL ADD'L FEE	

OF

OTHER THAN  
SMALL ENTITY

	RATE (\$)	ADDITIONAL FEE (\$)
OR	X 50 =	
OR	X 200 =	
OR		
OR	360	
OR	TOTAL	
OR	ADD'L FEE	

RATE (\$)		ADDITIONAL FEE (\$)
X	n	
X	n	
TOTAL ADD'L FEE		

O.R

OR

:

OK

UR

RATE (\$)	ADDITIONAL FEE (\$)
X	
X	
TOTAL	
ADD'L FEE	

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "2"  
highest Number Previously Paid For" (Total or Independent) is less than 3, enter "3".

If the Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1, enter "1". If the Number Previously Paid For (Total or Independent) is less than 3, enter "3".

If information is required by 37 CFR 1.16, The information is required to obtain or retain a benefit by the public which is to file (and by the) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is for the purpose of developing, preparing, and submitting the completed application.

ng, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments

Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS  
 ID TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.